56. (Amended) A method for preparing a product for the treatment of diabetes mellitus or hypoglycemia, which method comprises bringing an effective amount of an [a] amylin agonist [compound having amylin-like activity] into the form of a composition suitable for therapeutic administration.

66. (Amended) A pharmaceutical composition for use in the treatment of diabetes mellitus or hypoglycemia which comprises a therapeutically effective amount of a peptide agonist of amylin [having amylin like activity], said composition being lyophilized.

67. (Amended) A pharmaceutical composition for use in the treatment of diabetes mellitus or hypoglycemia which comprises a therapeutically effective amount of a peptide agonist of amylin [having amylin-like activity], said composition being disposed in a vehicle suitable for delayed-release administration of said peptide.

72. (Amended) A pharmaceutical composition for use in the treatment of diabetes mellitus or hypoglycemia which comprises a suspension of a peptide agonist of amylin [having amylin-like activity], said suspension being formulated with a zinc salt in a pharmaceutically acceptable buffer, said suspension being suitable for parenteral administration.

Please add the following claims:

76. The composition of claim 46 which further comprises an effective amount of insulin.

77. The composition of claim 47 which further comprises an effective amount of insulin.

78. The method of claim 56 which further comprises bringing an effective amount of insulin together with said amylin agonist to form said composition.

79. The method of claim 58 which further comprises bringing an effective amount of insulin together with amylin to form said composition.

80. The pharmaceutical composition of claim 66 which further comprises a therapeutically effective amount of insulin.

81. The pharmaceutical composition of claim 67 which further comprises a therapeutically effective amount of insulin.

82. The pharmaceutical composition of claim 72 which further comprises a therapeutically effective amount of insulin.

REMARKS

Claims 2-4, 6-18, 20-21, 23, 29-31, 34-40 have been cancelled without prejudice to their inclusion in a continuing application in view of the fact that the restriction requirement of Paper No. 6 was made final in Paper No. 9 in the parent case. It appears that claims 43-45 were inadvertently omitted from the listing of withdrawn claims at page 2 of the December 10, 1990 Office Action. These claims 43-45 are listed on the cover page and in the March 16, 1990 Office Action as standing withdrawn and, accordingly, Applicant has cancelled these claims as well.

Claims 46, 56, 66, 67 and 72 have been amended in order to more particularly point out and to reflect the fact that agonists of amylin such as those disclosed in the specification (CGRP, for example), are included within the scope of Applicant's invention as therein described.

1. Section 101

Claims 46-75 stand rejected under 35 U.S.C. §101 on the assertion that Applicant's invention is "inoperative and therefore lacks utility" (December 10, 1990 Office Action at page 2). The PTO further stated that, "[s]ince the alleged utility is unbelievable upon its face, applicant must have supportive data (in vivo experimental or clinical data) to overcome the [§101] rejection" (December 10, 1990 Office Action at page 2). While Applicant has argued that his invention is not such as to necessitate the provision of further data, in order to expedite